

Chart 1
ITEMS INCLUDED IN THE BASIC COST CHART

Housing: includes either a payment for rent or home ownership costs (which include taxes, mortgage payments, insurance and property maintenance), heating fuel, water, electricity, gas, refuse disposal, household textiles such as sheets and towels, furniture and appliance replacement, house wares, laundry and cleaning supplies, paper products, services and telephone at the basic rate.

Food: includes all food eaten at home, meals eaten at work or school and snacks.

Clothing: includes basic inner and outer clothing, undergarments, footwear, dress and work clothing, cleaning and pressing services and shoe repair.

Personal Care: includes haircuts, hair dressing, and such items as toothpaste, shaving cream, and shampoo.

Other Family Consumption: includes newspapers, magazines, entertainment expenses and allowances for participation in sports, hobbies and other recreation.

Chart 2
DEPENDENT ALLOCATIONS USING AFDC RELATED LIMITS

The amounts below are used for income allocations for dependents in Home and Community Based Waivers and dependents of nursing home residents when there is no community spouse. They are based on the Full Need Standard in the AFDC Program as of 8/96.

<u>ADULTS INCLUDED</u>		<u>ADULTS NOT INCLUDED</u>
Unit Size	Full Need	Full Need
1	262	154
2	412	295
3	553	437
4	695	579
5	837	721
6	979	863
7	1120	1005
<u>8</u>	1262	1146

Add \$142 to Full Need for each additional person.

Chart 3
SSI - RELATED INCOME STANDARDS, ALLOCATIONS AND DISREGARDS

Chart 3.1 - Disregards (eff. 7/1/87)

\$20.00 Federal disregard
 \$55.00 State disregard for Individual
 \$80.00 State disregard for Couple

Chart 3.2 - Maximum Allocations (eff. 1/1/09)

\$337.00 Ineligible child living allowance.
 \$674.00 One parent - living in the household.
 \$1011.00 Two parents living in the household.

Chart 3.3 - Maximum Income-in-Kind (eff. 1/1/09)

Individual: \$244.66 (Living alone or with others)
 \$224.66 (Living in the household of another)
 Couple: \$357.00 (Living alone or with others)
 \$337.00 (Living in the household of another)

Chart 3.4 - Maximum Countable Income (eff. 1/1/09)

Individual: \$684.00 (Living alone or with others)
 \$682.00 (Living in the household of another)
 Couple: \$1026.00 (Living alone or with others)
 \$1023.00 (Living in the household of another)

Chart 3.5 - Ineligible Spouse Standard (eff. 1/1/09)

\$337.00 Ineligible spouse in the deeming process

Chart 3.6 - SSI and State Supplement Maximum Income and Payment Amounts (eff. 1/1/09)

Living Arrangement	INDIVIDUAL		COUPLE			
	SSI Countable Income Limit & Maximum Benefit	State Supplement Benefit	State Supplement Countable Income Limit	SSI Countable Income Limit & Maximum Benefit	State Supplement Benefit	State Supplement Countable Income Limit
A	\$674.00	\$10.00	\$684.00	\$1011.00	\$15.00	\$1026.00
C	\$674.00	\$8.00	\$682.00	\$1011.00	\$12.00	\$1023.00
D	\$674.00	\$49.00	\$723.00	\$1011.00	\$273.00	\$1284.00
E	\$674.00	\$217.00	\$891.00	\$1011.00	\$590.00	\$1601.00
F	\$674.00	\$234.00	\$908.00	\$1011.00	\$636.00	\$1647.00
G	\$674.00	\$234.00	\$908.00	\$1011.00	\$636.00	\$1647.00
H	\$30.00	\$10.00	\$40.00	\$60.00	\$20.00	\$80.00
I	\$674.00	\$10.00	\$684.00	\$1011.00	\$15.00	\$1026.00

If countable income is less than the SSI limit plus \$20.00 for a particular "Living Arrangement", the individual should apply for SSI in order to get the SSI benefit and State Supplement. If more, but less than the "State Supplement Income Limit" (plus \$75 for living arrangements A and C), the individual can apply at Department of Health and Human Services for the State Supplement only.

Chart 3.7 - Annual QI 2 Benefit - removed**Chart 3.8 - Awaiting Placement for Residential Care (APRC)/ Days Awaiting Placement (DAP)**

Note: The rates below are set by the Office of MaineCare Services and reproduced here for reference.

Maximum Allowable Monthly Income		Medical Expenses Used In Meeting Spendown (Deductible): Daily Rate
7/1/99	\$1,617	\$35.62
7/1/00	\$1,727	\$38.44
7/1/01	\$1,811	\$40.58
7/1/02	\$2,012	\$48.90
7/1/03	\$2,214	\$69.26
7/1/04	\$2,258	\$70.43
7/1/05	\$2,512	\$79.50
7/1/06	\$2,594	\$81.99
7/1/07	\$2,663	\$83.98
7/1/08		

Chart 3.9 - Income Limit for Adult Family Care Homes

Note: The rates below are set by the Office of MaineCare Services and are reproduced here for reference.

Adult Family Care Homes	
01/01/99	\$1,661
01/01/00	\$1,673
01/01/01	\$1,691
01/01/02	\$1,706
01/01/03	\$1,728
01/01/04	\$1,740
07/01/04	\$2,580.44
01/01/05	\$3,565
01/01/06	\$3,712
01/01/07	\$3,834
01/01/08	\$3,922
01/01/09	\$4,149

Chart 3.10 – Premiums for HIV Benefit - 7/01/10

INCOME LEVEL	MONTHLY PREMIUM
Equal to or less than 150% of Federal Poverty Level (See Chart 6)	0
150.1% - 200% of Federal Poverty Level (See Chart 6)	\$29.56
200.01% - 250% of Federal Poverty Level (See Chart 6)	\$59.11

Chart 3.11 – Spousal Living Allowance for SSI Recipients

Note: For non-SSI recipients the amount of the Living Allowance is the difference between countable income and 100% federal poverty level (See Chart 6).

2/2002	\$249
2/2003	\$252
2/2004	\$267
2/2005	\$274
1/2006	\$269
1/2007	\$283
1/2008	\$285
1/2009	\$284
1/2011	\$289

Chart 3.12 – Premiums for MaineCare Katie Beckett Coverage Group

Family Income as a % of FPL Federal Poverty Level	Monthly Premium with Private Insurance	Monthly Premium without Private insurance
150 – 200%	\$ 11	\$ 30
201 – 250%	\$ 14	\$ 40
251 - 300%	\$ 18	\$ 50
301 - 350%	\$ 21	\$60
351 - 400%	\$ 25	\$70
401 - 450%	\$30	\$85
451 - 500%	\$35	\$100
501 - 550%	\$ 40	\$115
551 - 600%	\$ 46	\$130
601 - 700%	\$51	\$145
701 - 800%	\$61	\$175
801 - 900%	\$72	\$205
901 – 1000%	\$84	\$240
1001-1200%	\$96	\$275
1201-1400%	\$117	\$335
1401-1600%	\$138	\$395
1601-1800%	\$159	\$455
1801-2000%	\$182	\$520
2001-2500%	\$207	\$590
2501%+	\$263	\$750

Chart 4 NURSING CARE LIMITS

Chart 4.1 Categorically Needy Nursing Care Status Income Limits

\$1869.00 eff. 1/1/07

\$1911.00 eff. 1/1/08

\$2022.00 eff. 1/1/09

This is used as the income limit for:

- ◆ Categorically Needy Nursing Care Status
- ◆ Home and Community Based Waivers
- ◆ Katie Beckett coverage
- ◆ SSI - Related or Family - Related coverage group in a hospital for thirty consecutive days

Chart 4.2 Maximum Waiver Allowances

The amounts below are used as the maximum spousal allowance for Home and Community Based Waivers:

\$623.00 eff. 1/1/07

\$637.00 eff. 1/1/08

\$674.00 eff. 1/1/09

Chart 4.3: Nursing Care Private Rate

\$3917.00 eff. 8/1/1994

\$6255.00 eff. 1/1/2006

\$6778.00 eff. 1/1/2008

\$7258.00 eff. 1/1/2009

\$7667.00 eff. 9/1/2011

Chart 4.4 Spousal Impoverishment

- Community Spouse Asset Allowance

	Maximum
1/1/07	\$101,640
1/1/08	\$104,400
1/1/09	\$109,560

- Minimum Monthly Income Standard

\$1,712.00 eff. 7/1/07

\$1,750.00 eff. 7/1/08

\$1,822.00 eff. 7/1/09

- Monthly Excess Shelter Standard (this amount is 30% of the Minimum Monthly Income Standard [above] for the corresponding effective date)

\$513.00 eff. 7/1/07

\$525.00 eff. 7/1/08

\$547.00 eff. 7/1/09

- Maximum Monthly Income Allocation

\$2,541 eff. 1/1/07

\$2,610 eff. 1/1/08

\$2,739 eff. 1/1/09

Chart 5
PROTECTED INCOME LEVEL

The following levels are effective 11/91:

<u>Unit Size</u>	<u>Protected Income Level</u>
1	315
2	341
3	458
4	575
5	691
6	808
7	925
8	1033
9	1150
10	1266

Add \$116 for each additional person.

Chart 6 FEDERAL POVERTY LEVELS

FEDERAL POVERTY LEVELS - EFFECTIVE JANUARY 2011

The following dollar amounts are based on the federal poverty level published in the Federal Register. The amounts will be changed whenever the Federal Poverty Level is adjusted

Family Size	100%	120%	125%	133%	135%	150%	160%	170%	185% (+25%)	200%	250%	350%
1	\$ 908	\$ 1,089	\$ 1,135	\$ 1,207	\$ 1,226	\$ 1,362	\$1,452	\$ 1,543	\$ 1,679 (\$2,099)	\$ 1,815	\$ 2,269	\$ 3,177
2	\$ 1,226	\$ 1,471	\$ 1,533	\$ 1,631	\$ 1,655	\$ 1,839	\$ 1,962	\$ 2,084	\$ 2,268 (\$2,835)	\$ 2,452	\$ 3,065	\$ 4,291
3	\$ 1,545		\$ 1,931	\$ 2,054		\$ 2,317	\$ 2,471	\$ 2,626	\$ 2,857 (\$3,572)	\$ 3,089		\$ 5,405
4	\$ 1,863		\$ 2,329	\$ 2,478		\$ 2,794	\$ 2,980	\$ 3,167	\$ 3,446 (\$4,308)	\$ 3,725		\$ 6,519
5	\$ 2,181		\$ 2,727	\$ 2,901		\$ 3,272	\$ 3,490	\$ 3,708	\$ 4,035 (\$5,044)	\$ 4,362		\$ 7,633
6	\$ 2,500		\$ 3,124	\$ 3,324		\$ 3,749	\$ 3,999	\$ 4,249	\$ 4,624 (\$5,780)	\$ 4,999		\$ 8,748
7	\$ 2,818		\$ 3,522	\$ 3,748		\$ 4,227	\$ 4,508	\$ 4,790	\$ 5,213 (\$6,517)	\$ 5,635		\$ 9,862
8	\$ 3,136		\$ 3,920	\$ 4,171		\$ 4,704	\$ 5,018	\$ 5,331	\$ 5,802 (\$7,253)	\$ 6,272		\$10,976
Each added person	\$ 319		\$ 398	\$ 424		\$ 478	\$ 510	\$ 542	\$ 589 (\$737)	\$ 637		\$ 1,115

**Chart 7
FEE SCHEDULE FOR QDWI**

If Monthly Countable Income is	Monthly Payment Required Is This % of the Current Medicare Part A Premium
150% FPL - 160% FPL	10%
160.01% - 170%	20%
170.01% - 180%	30%
180.01% - 190%	40%
190.01% - 200%	50%
Over 200%	Not Eligible

Countable income is determined using SSI - Related rules.

**Chart 8
CUB CARE**

Family Income as % of Federal <u>Poverty Level</u>	Monthly Premium for 1 Child <u>for 1 Child</u>	Monthly Premium for 2 or More Children <u>2 or More Children</u>
150.1% to 160%	\$ 8	\$16
160.1% to 170%	\$16	\$32
170.1% to 185%	\$24	\$48
185.1% to 200%	\$32	\$64